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Application Number	10/023,963
Filing Date	12/17/2001
First Named Inventor	Addepalli Kumar
Art Unit	2616
Examiner Name	SHAND, ROBERTA A
Attorney Docket Number	RAZA-04100

I hereby revoke all previous powers of attorney given in the above-identified application.

RECEIVED**CENTRAL FAX CENTER****DEC 05 2006**☐ A Power of Attorney is submitted herewith.

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☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature

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Date

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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